## **FY10 EMPLOYEE TIME REPORTING WORKSHEET**

Organization or Department Name:								Pay	Period:								
Name:									From:			Superv	isor Sigr	nature:			
Employee Signature:								TI	nrough:				eper Sig	nature	(Optional		
	SUN	MON	TUE	W E E	THU	FRI	SAT	WEEK	SUN	MON	TUE WED	EK 2 THU	FRI	SAT	WEEK TOTAL	PAY PERIOD TOTAL	ABC
Work Schedule								0.00							0.00	0.00	
PAY CODE	SUN	MON	TUE	WED	THU	FRI	SAT		SUN	MON	TUE WED	THU	FRI	SAT			CODE
•								0.00							0.00	0.00	
								0.00							0.00	0.00	
								0.00							0.00	0.00	
								0.00							0.00	0.00	
								0.00							0.00	0.00	
								0.00							0.00	0.00	
								0.00							0.00	0.00	
								0.00							0.00	0.00	
								0.00							0.00	0.00	
								0.00							0.00	0.00	
								0.00							0.00	0.00	
								0.00							0.00	0.00	
								0.00							0.00	0.00	0
								0.00							0.00	0.00	
								0.00							0.00	0.00	
								0.00							0.00	0.00	
Total Hours	0.00	0.00	0.00 #VALUE! #	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00 0.00 #VALUE! #VALUE	0.00	0.00	0.00	0.00	0.00	
Record		#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	From	#VALUE!	#VALUE!	#VALUE!   #VALUE	#VALUE!	#VALUE!	#VALUE!	From	NOTES:	
Leave								То							То		
Record								From							From		
Comp Time Earned								То							То		
Record								From							From		
Credit Hours Earned								То							То		
Record								From							From		
Overtime								То							То		
INITIALS																	